

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA

FORT LAUDERDALE DIVISION

CASE NO. 00-6028-CR-DIMITROULEAS

UNITED STATES OF AMERICA,

Magistrate Judge Snow

Plaintiff,

vs.

DAVID G. TRACY,

Defendant.

FILED BY AK D.C.
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CLERK U.S. DIST. CT.
S.D. OF FLA.-FTL.

MOTION FOR RELEASE PENDING SENTENCING AND
INCORPORATED MEMORANDUM OF LAW

The Defendant, DAVID G. TRACY, through undersigned counsel, respectfully moves for the entry of an Order permitting Mr. TRACY's release on a personal surety bond pending sentencing herein, and in support thereof states:

1. On June 1, 2000, Mr. TRACY was found guilty of evading the payment of federal income taxes for the tax year 1996 in the approximate amount of \$28,000, in violation of 26 U.S.C. §7201 (Count III). He was acquitted of Count I, and Count II has been dismissed. The Court remanded him into custody at that time.

2. The maximum prison sentence for the count of conviction is five (5) years. The Guidelines, however, which are found in U.S.S.G. §2T1.1 and the Tax Table in §2T4.1, are based upon the amount of "tax loss," -- i.e., "the total amount of loss that was the object of the offense," or more specifically in this case, "the amount of tax that the taxpayer owed and did not pay." §2T1.1(c) (1)

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and (3). Any applicable interest and penalties are not included in the tax loss (id., Application Note 1). Accordingly, the tax loss involved in the count of conviction (\$28,000), has an Offense Severity Level of 12 (\$2T4.1). Since Mr. TRACY has no significant criminal history -- the last incident occurring 30 years ago when he was 23 years of age -- he falls in Criminal History Category I, and thus his Guidelines are in the range of 10 to 16 months. In fact, even if one bases the "tax loss" amount on all three counts of the Indictment (approximately \$53,000) -- i.e., including the counts that were dismissed or of which Mr. TRACY was acquitted -- the Guideline range is still only 12 to 18 months (TOL 13, CHC I).

3. Mr. TRACY has no criminal record, except for a disorderly conduct/prowling charge as a juvenile and a joy-riding charge in 1970 (he was a passenger in a car that had been stolen by another youth). There have been no other arrests for the past thirty (30) years.

4. Mr. TRACY, except for his time serving in the military, has been living in the South Florida area for the past **forty-five (45) years** -- that is, since he was 8 years of age (he is presently 52). His wife, father (his mother is deceased) and brother all live in Florida, and while his 25 year-old son is presently living and working in the Washington, D.C. area, he has advised undersigned counsel that he plans on returning to Florida shortly.

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Mr. TRACY and his wife, Bonnie, have been married for 13 years. Mr. TRACY is a United States citizen, and has absolutely no connection -- remote or otherwise -- with any other country, except for the fact that he owns a vacant, undeveloped lot (.6 of an acre) in Mexico that he purchased as an investment some years ago for \$5,000.

5. Mr. TRACY attended Carol City High in Miami-Dade County, and while he left school before graduating, he subsequently earned his G.E.D. while in the service, his A.A. degree in Fire Science Technology and Administration from Miami-Dade Community College, and his Bachelor's degree in Labor Relations and Manpower Studies from Florida International University.

He also has received specialized training as a Cardio-Pulmonary Resuscitation Instructor and an Emergency Medical Technician, as well as in the area of the storage, transportation and disposal of hazardous materials.

6. Mr. TRACY served honorably in the United States Army for 3 years. He volunteered for combat duty in Viet Nam, but was assigned to serve as a nuclear missile crewman with the NATO forces in Italy. He was awarded both the Good Conduct Medal and the National Defense Medal, as well as a special hardship duty citation.

7. As the Court knows, Mr. TRACY served for 25 years (1971-1996) as a Firefighter with the City of Hallandale Beach, rising to

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the rank of Battalion Chief and being honored by at least one Commendation for Outstanding Heroism. During his time with the Fire Department, he also served as Treasurer, Vice-President and President of Local 2238 of the International Association of Firefighters.

8. Since his retirement from the Fire Department, Mr. TRACY has utilized his skills and training by serving as an unpaid volunteer with the American Red Cross, responding to natural disaster areas to render aid and assistance. He has been called to serve, for example, in connection with Hurricane Georges in Puerto Rico (65 days), the Florida wild fires, and the Air Alaska disaster in California [copies of some of his performance evaluations are attached here as Exhibit "A"].

9. Mr. TRACY has known about the criminal investigation that led to his being charged herein since 1996, and he made no effort to abscond. In fact, he was in California on a Red Cross relief mission when he was advised, earlier this year, that charges had been filed, and he voluntarily and promptly returned from California to Fort Lauderdale to surrender himself.

10. Except for a period of a few days, Mr. TRACY was at liberty on a \$75,000 personal surety bond from the time of his initial appearance herein until the conclusion of the jury trial. He made all required court appearances during that time, and otherwise fully complied with all of the conditions of his release.

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11. 18 U.S.C. §3143(a) provides that except as to those convicted of a serious drug offense, an offense involving violence or an offense with a maximum punishment of death or life imprisonment, a convicted person who is facing jail time under the Guidelines shall be detained pending sentencing,

unless the judicial officer finds by clear and convincing evidence that the person is not likely to flee or pose a danger to the safety of any other person or the community if released under section 3142(b) or (c).

18 U.S.C. §3142(b), in turn, provides as follows:

(b) Release on personal recognizance or unsecured appearance bond. -- The judicial officer shall order the pretrial release of the person on personal recognizance, or upon execution of an unsecured appearance bond in an amount specified by the court, subject to the condition that the person not commit a Federal, State, or local crime during the period of release, unless the judicial officer determines that such release will not reasonably assure the appearance of the person as required or will endanger the safety of any other person or the community.

Subsection (c) of §3142 provides that where the court determines that a personal recognizance bond will not suffice to accomplish those stated objectives, the court may impose the least restrictive conditions -- such as a curfew, reporting to Pre-Trial Services, etc. -- to do so.

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12. It is respectfully submitted that in view of all of the facts set forth above -- including Mr. TRACY's extensive and long-standing ties to this community, his lack of any significant prior criminal record, his military and volunteer service to the nation and the community, his admirable work history, the fact that he is not facing any prolonged period of incarceration, his voluntary surrender to the authorities, and his full compliance with his pre-trial conditions of release -- there is indeed "clear and convincing evidence" that his release on a personal recognizance bond would reasonably assure his appearance at sentencing and that he would not present any danger to the community. It is submitted that the fact that his failure to appear at sentencing would result in another charge [Failure to Appear, in violation of 18 U.S.C. §3146(a) and (b) (A) (ii)], equally serious to the one of which he was convicted, is alone sufficient to assure his appearance.

13. If the Court for some reason does not believe that an unsecured personal appearance bond would suffice, it could of course add curfew or reporting conditions, or if necessary, require that the appearance bond be co-signed by Stephen and Beatrice Tracy -- Mr. TRACY's brother and sister-in-law. They own their own home in Davie, Florida, and have approximately \$90,000 equity therein (present market value of approximately \$140,000, with a mortgage balance of approximately \$50,000). They are willing to co-sign, with the knowledge that they could lose their home if Mr. TRACY

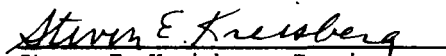
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does not appear for his sentencing.

14. Undersigned counsel has discussed this matter with A.U.S.A. Matthew Menchel, who has not as of yet advised the undersigned of the government's position with respect to the relief requested herein, though he concedes that Mr. TRACY's release would not present a danger to the community.

WHEREFORE, it is respectfully moved that an order be entered by this Honorable Court, directing Mr. TRACY's release pending sentencing on the \$75,000 personal recognizance appearance bond previously filed herein, or upon the filing of a new personal recognizance appearance in an amount and with such conditions as the Court deems appropriate.

Respectfully submitted,


Steven E. Kreisberg, Esquire
Attorney for Defendant TRACY
Fla. Bar No. 166819
3250 Mary Street
Suite 400
Coconut Grove, Florida 33133
(305) 442-4333

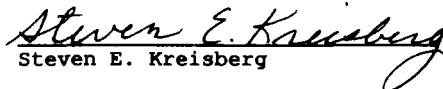
Attachment: Exhibit "A"

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing was mailed and faxed this 16th day of June, 2000, to A.U.S.A.

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Matthew Menchel, 500 East Broward Boulevard, Suite 700, Ft. Lauderdale, Florida 33394 [954-356-7336], and mailed to David Tracy, Reg. No. 55191-004, c/o Federal Detention Center, P.O. Box 019120, Miami, Florida 33101-9120.


Steven E. Kreisberg

David Tracy DSHR Progress Sheet

December 7, 1998

DR NUMBER	ASSIGN	DATES	EVALUATION DAYS
Fla Wild Fires DR-650	GL/T	07/10 - 07/17	Satisfactory 8
Hurr. Georges FL/K DR-760	GL/T	09/29 - 10/03	Satisfactory 5
Hurr. Georges W/FL DR-766	GL/T	10/04 - 10/12	Specialist 9
Hurr. Georges W/FL DR-766	GL/O	10/13 - 10/17	Specialist 5
Hurr. Georges P.R. DR-755	GL/C	10/21 - 10/26	Coordinator 6
Hurr. Georges P.R. DR-755	GL/C	10/21 - 11/11	Satisfactory 21
Hurr. Georges P.R. DR-755	GL/C	10/21 - 12/05	Coordinator 46

DR-650 FL/Wild Fires	GL/T	07/10 - 07/17	8
DR-760 Hurr. Georges FL/Keys	GL/T	09/29 - 10/03	5
DR-766 Hurr. Georges W/FL	GL/T - GL/O	10/04 - 10/17	14
DR-755 Hurr. Georges P.R.	GL/C	10/21 - 12/05	46

American Red Cross

PERFORMANCE REVIEW OF DISASTER WORKER

<p>SECTION I</p> <p>Disaster Worker's Name <u>David Tracy</u></p> <p>Name of Unit of Affiliation <u>Broward</u></p> <p>Location <u>Fort Lauderdale, Florida</u></p> <p>FL STATE <u>10024</u> CHAPTER CODE <u>261-76-5546</u> SOCIAL SECURITY NUMBER</p> <p>Personnel Classification (check one)</p> <p><input checked="" type="checkbox"/> Volunteer <input type="checkbox"/> Chapter Employee</p> <p><input type="checkbox"/> National Employee <input type="checkbox"/> National Disaster Reserve</p> <p><input type="checkbox"/> Other (specify) _____</p>	<p>SECTION II</p> <p>6/98</p> <p>Name of Disaster <u>Florida Wild fires</u> DR No. <u>650</u></p> <p>Job Title or Duties on Disaster Operation <u>Government Liaison Tech.</u></p> <p>Length of Time Above Position Was Held:</p> <p>From <u>7/10/98</u> to <u>7/19/98</u> Days <u>8</u></p> <p>Length of Time Supervised by This Evaluator: Days <u>8</u></p> <p>Place of Assignment(s): <u>Headquarters FL</u></p>
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SECTION III Overall Performance

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Clearly Unsatisfactory	Needs Improvement	Fully Successful	Exceeds Expectations
Performance is significantly below standards	Performance does not fully meet standards	Performance consistently meets and sometimes exceeds standards	Performance is exceptional and significantly exceeds standards

SECTION IV Supervisor's Comments

(Comments must support the rating - be specific and cite examples; include, as appropriate, recommendations on worker's future disaster operation assignments.)

David was assigned to DR 650 as a Government Liaison Tech. primarily as a networking opportunity. He quickly picked up the routines of the GL function and assumed responsibility for most of the regular duties. He absorbed the material from the 302, a very thorough and incredibly rapid manner. David was instrumental in resolving several issues regarding mass care and family services. His background as a battalion chief and working in EOC's make him a natural for this function. He should be given every opportunity for further development in the GL function. I recommend that he be allowed to serve in high level positions on future operations.

Supervisor's Printed Name Cecil Rostovsky Signature Cecil Rostovsky Date 7-16-98

SECTION V Reviewer's Comments

☒ I concur with the evaluation and rating of the supervisor.

☐ I have modified the evaluation and/or rating of the supervisor as noted by my initials above for the following reasons:

Reviewer's Printed Name Daniel R. Tallman Signature Daniel R. Tallman Date 6/15/98

SECTION VI Worker's Comments

(Your written comments are encouraged. If you do not wish to comment, write "None.")

I am very grateful for this opportunity to function as a GL Tech. I am also very aware of the benefit of being directed by Cecil Rostovsky. I have learned so much during this DR and I am looking forward to future opportunities for training + GL assignments.

Worker's Printed Name David Tracy Signature David Tracy Date 7/16/98

(Note: Your signature does not indicate agreement or disagreement with the evaluation, only that you have had an opportunity to review it.)

Name: David Tracy
 of Affiliation: Broward
 City: St. Lauderdale
 STATE FL CHAPTER CODE 19024 SOCIAL SECURITY NUMBER 261-76-7546
 UNIT CODE 0000
 Personnel Classification (check one)
☒ Volunteer ☐ Chapter Employee
☐ National Employee ☐ National Disaster Reserve
☐ Other (specify) _____

Name of Disaster: Hurricane George DR No. 260
 DSHR System Member: ☒ Yes ☐ No
 Function/Position: GL/Teach.
 Assignment: FSEF - Homestead G/T
 DSHR System Specialty Track: GLO
 Length of Time Above Position Was Held:
 From: 9/29/98 to 10/3/98 Days: 5
 Length of Time Supervised by This Evaluator: Days: 5
 Place(s) of Assignment: Homestead - EOC/DRO/H

OVERALL PERFORMANCE ON THIS RELIEF OPERATION

☒ Satisfactory☐ Needs Improvement

PERFORMANCE CRITERIA

Satisfactory Needs Improvement *

WORK REQUIREMENTS:

- Supports the objectives of the supervisor, relief operation, and the organization
- Applies function regulations, procedures, and processes correctly
- Exercises authority appropriate to assigned position
- Carries out assigned tasks independently
- Exhibits flexibility and works well under stress and adverse conditions
- Exhibits good work habits, punctuality, and attendance

Satisfactory	Needs Improvement *
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>

INTERPERSONAL SKILLS:

- Provides good customer service
- Demonstrates respect for the ethnic, cultural, and physical diversity of the staff and community
- Demonstrates ability to work well with other staff
- Behaves in a professional manner both during and after work hours

Satisfactory	Needs Improvement *
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>

SUPERVISORY PERFORMANCE (applicable for staff serving in a supervisory position)

Satisfactory Needs Improvement* Not Observed/Applicable

- Controls materials and supplies appropriately
- Solves problems creatively and initiates needed activities
- Assigns tasks clearly
- Submits accurate and timely reports
- Provides constructive feedback and evaluation to assigned staff
- Exhibits respect for staff assigned
- Is available to staff
- Budgets properly and manages delegated financial authority
- Requests staff appropriately
- Establishes or administers the service delivery plan, transition plan, and/or closing plan

Satisfactory	Needs Improvement*	Not Observed/Applicable
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Items marked "Needs Improvement" require specific examples of deficiency and improvement recommendations documented in the "performance narrative" on the reverse side of this form.

PERFORMANCE NARRATIVE (Attach an additional page, if necessary)

Mr. Tracy has shown himself prepared and knowledgeable - and therefore, very useful in his function - He served well, we encourage him to continue w/ the function.

Disaster training recommended to enhance or improve knowledge and skills:

Additional experience recommended to enhance or improve knowledge and skills:

as much as possible in and out of the state.

Based upon performance on this relief operation I recommend the following for consideration: (check one)

- ☐ The staff member be promoted to the _____ position.
- ☒ The staff member continue at the same level.
- ☐ The staff member be placed in a position of lesser responsibility.
- ☐ The staff member not be assigned to future operations without further training/counseling.

Direct Supervisor's Name: John Young Title: SC/O

Direct Supervisor's Signature: [Signature] Date: 10/3/98

Reviewer's Name: SELMA CHASTAINE Title: Dir

Technical Input Provided By-Name: Title:

Reviewers' Comments:

Reviewer's Signature: [Signature] Date: 10-3-98

Staff Member's Signature: [Signature] Date: 10/3/98

(Signature does not imply agreement, but indicates review has been conducted)

Staff Member's Comments:

This assignment was of a short duration but much was learned. This was a great experience working with FSERT. Additionally, working with Gardner Brown 95 ESF-6 was also a learning experience.

American Red Cross

DISASTER RELIEF OPERATION WORK PERFORMANCE EVALUATION

Name: David Tracy

Unit of Affiliation: Broward

City: Fort Lauderdale

FL 110024 261-716-7746

STATE CHAPTER CODE SOCIAL SECURITY NUMBER

UNIT CODE

UNIT CODE

Personnel Classification (check one)

- ☒ Volunteer ☐ Chapter Employee
☐ National Employee ☐ National Disaster Reserve
☐ Other (specify)

Name of Disaster: Hurricane Georges DR No. 766

DSHR System Member: ☒ Yes ☐ No

Function/Position: GL-T

Assignment: ARC HQ Pensacola GL-T

DSHR System Specialty Track: GL

Length of Time Above Position Was Held:

From: 10/4/98 to 10/12/98 Days: 9

Length of Time Supervised by This Evaluator: Days: 9

Place(s) of Assignment: ARC-HQ Pensacola, FL

OVERALL PERFORMANCE ON THIS RELIEF OPERATION

- ☒ Satisfactory ☐ Needs Improvement

PERFORMANCE CRITERIA

WORK REQUIREMENTS:

- Supports the objectives of the supervisor, relief operation, and the organization
- Applies function regulations, procedures, and processes correctly
- Exercises authority appropriate to assigned position
- Carries out assigned tasks independently
- Exhibits flexibility and works well under stress and adverse conditions
- Exhibits good work habits, punctuality, and attendance

INTERPERSONAL SKILLS:

- Provides good customer service
- Demonstrates respect for the ethnic, cultural, and physical diversity of the staff and community
- Demonstrates ability to work well with other staff
- Behaves in a professional manner both during and after work hours

Satisfactory Needs Improvement *

<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
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<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>

SUPERVISORY PERFORMANCE (applicable for staff serving in a supervisory position) N/A.

	Satisfactory	Needs Improvement*	Not Observed/Applicable
• Controls materials and supplies appropriately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Solves problems creatively and initiates needed activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Assigns tasks clearly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Submits accurate and timely reports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Provides constructive feedback and evaluation to assigned staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Exhibits respect for staff assigned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Is available to staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Budgets properly and manages delegated financial authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Requests staff appropriately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Establishes or administers the service delivery plan, transition plan, and/or closing plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* Items marked "Needs Improvement" require specific examples of deficiency and improvement recommendations documented in the "performance narrative" on the reverse side of this form.

PERFORMANCE NARRATIVE (Attach an additional sheet if necessary.)

DAVID TRACY TRANSFERRED TO DCL 766 FROM DCL 760 (FL Keys).
 HE ASSISTED THE GL/O IN THE DAILY OPERATION OF THE FUNCTION
 AFTER THE GL/AD WAS SENT TO SEOC/FEMA DFO. DAVID
 DID AN EXCELLENT JOB OF LEARNING PROCEDURES FOR DETERMINATION
 OF INFORMATION, MAINTAINING FILES, DOING FOLLOW-UP CALLS, AND
 KEEPING CONTACT WITH LOCAL EMA'S, AND WITH BOTH SEOC AND
 FEMA. HE HAS PROVED TO BE A HIGHLY MOTIVATED STUDENT.

Disaster training recommended to enhance or improve knowledge and skills:

SID AND FLS II

Additional experience recommended to enhance or improve knowledge and skills:

ADDITIONAL OPPORTUNITIES TO SERVE IN H.Q. AND AS
 STATE EOC OR FEMA DFO LIAISON

Based upon performance on this relief operation I recommend the following for consideration: (check one)

- ☒ The staff member be promoted to the SPECIALIST position.
☐ The staff member continue at the same level.
☐ The staff member be placed in a position of lesser responsibility.
☐ The staff member not be assigned to future operations without further training/counseling.

Direct Supervisor's Name: DAVID M. SCHMITT

Title: GOV. LIAISON OFFICER

Direct Supervisor's Signature: [Signature]

Date: 10/12/98

Reviewer's Name: MARY LOU TAYLOR

Title: ASST DIR

Technical Input Provided By-Name: _____

Title: _____

Reviewers' Comments: Thanks, looking forward working with again.

Reviewer's Signature: [Signature]

Date: 10/12/98

Staff Member's Signature: [Signature]

Date: 10/12/98

(Signature does not imply agreement, but indicates review has been conducted)

Staff Member's Comments: Grateful to have been assigned to work
with David Schmitt GL/O. I have Learned much under
his mentoring and look forward to the opportunity
to work with David in the future.

American Red Cross

DISASTER RELIEF OPERATION WORK PERFORMANCE EVALUATION

Name: DAVID TRACY

Unit of Affiliation: _____

City: FORT LAUDERDALE

PL 110024 261-76-7546

STATE CHAPTER CODE SOCIAL SECURITY NUMBER

UNIT CODE

Personnel Classification (check one)

- ☒ Volunteer ☐ Chapter Employee
☐ National Employee ☐ National Disaster Reserve
☐ Other (specify) _____

Name of Disaster: HURRICANE GORDON No. 766

DSHR System Member: ☒ Yes ☐ No

Function/Position: GOV LIAISON TECH

Assignment: GOV LIAISON OFFICER

DSHR System Specialty Track: _____

Length of Time Above Position Was Held:

From: 10/13/98 to 10/17/98 Days: 5

Length of Time Supervised by This Evaluator: Days: 5

Place(s) of Assignment: HQ PENSACOLA, FLA.

OVERALL PERFORMANCE ON THIS RELIEF OPERATION

☒ Satisfactory ☐ Needs Improvement

PERFORMANCE CRITERIA

WORK REQUIREMENTS:

- Supports the objectives of the supervisor, relief operation, and the organization
- Applies function regulations, procedures, and processes correctly
- Exercises authority appropriate to assigned position
- Carries out assigned tasks independently
- Exhibits flexibility and works well under stress and adverse conditions
- Exhibits good work habits, punctuality, and attendance

INTERPERSONAL SKILLS:

- Provides good customer service
- Demonstrates respect for the ethnic, cultural, and physical diversity of the staff and community
- Demonstrates ability to work well with other staff
- Behaves in a professional manner both during and after work hours

Satisfactory Needs Improvement *

<input checked="" type="checkbox"/>	<input type="checkbox"/>
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<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>

SUPERVISORY PERFORMANCE (applicable for staff serving in a supervisory position)

	Satisfactory	Needs Improvement*	Not Observed/Applicable
• Controls materials and supplies appropriately	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Solves problems creatively and initiates needed activities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Assigns tasks clearly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Submits accurate and timely reports	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Provides constructive feedback and evaluation to assigned staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Exhibits respect for staff assigned	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Is available to staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Budgets properly and manages delegated financial authority	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Requests staff appropriately	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Establishes or administers the service delivery plan, transition plan, and/or closing plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* Items marked "Needs Improvement" require specific examples of deficiency and improvement recommendations documented in the "performance narrative" on the reverse side of this form.

PERFORMANCE NARRATIVE: (Attach an additional sheet if necessary.)
 David assumed the duties of GL/O upon the COB of the
 Officer and Assistant Officer. He did an excellent job
 of maintaining contact with the DFO as well as the
 local Western Chapters. There were several Family Service
 issues resolved as well as a smooth transition of this
 function to the area chapter and Capital Chapter in
 Tallahassee

Disaster training recommended to enhance or improve knowledge and skills:
 Recommend SID and other service delivery courses.

Additional experience recommended to enhance or improve knowledge and skills:
 Recommend Internship at the DOE (NAHQ)

Based upon performance on this relief operation I recommend the following for consideration: (check one)

- ☒ The staff member be promoted to the Spec. level position.
☒ The staff member continue at the same level.
☐ The staff member be placed in a position of lesser responsibility.
☐ The staff member not be assigned to future operations without further training/counseling.

Direct Supervisor's Name: MARY Lou TAYLOR Title: Asst Dir

Direct Supervisor's Signature: Mary Lou Taylor Date: 10/16/98

Reviewer's Name: Louise Kolbert Title: Job Riv.

Technical Input Provided By-Name: _____ Title: _____

Reviewers' Comments: Thanks for a job well done!

Reviewer's Signature: Louise Kolbert Date: 10/16/98

Staff Member's Signature: DD R Tracy Date: 10/16/98
 (Signature does not imply agreement, but indicates review has been conducted)

Staff Member's Comments: _____

American Red Cross

DISASTER RELIEF OPERATION WORK PERFORMANCE EVALUATION

Name: David Tracy
 Date of Assignment: Broward
 at: FT. Lauderdale

STATE FL CHAPTER CODE 110-024 SOCIAL SECURITY NUMBER 541-114-1154
 UNIT CODE 01

Personal Classification (check one)

- ☐ Volunteer ☐ Chapter Employee
☐ National Employee ☐ National Disaster Reserve
☐ Other (specify) _____

Name of Disaster: Hurricane George OR No. 755

DSRR System Member ☒ Yes ☐ No

Function/Position: GLIS

Assignment: HQ - Maguire P.R.

DSRR System Specialty Trade: GL

Length of Time Above Position Was Held:

From: 12/21 to 10/26 Days: 6

Length of Time Supervised by This Evaluator: Days: 6

Place(s) of Assignment: HQ - Maguire P.R.

OVERALL PERFORMANCE ON THIS RELIEF OPERATION

- ☐ Satisfactory ☐ Needs Improvement

PERFORMANCE CRITERIA

WORK REQUIREMENTS:

- Supports the objectives of the supervisor, relief operation, and the organization
- Applies functions, regulations, procedures, and processes correctly
- Exercises authority appropriate to assigned position
- Carries out assigned tasks independently
- Exhibits flexibility and works well under stress and adverse conditions
- Exhibits good work habits, punctuality, and attendance

Satisfactory Needs Improvement *

<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>

INTERPERSONAL SKILLS:

- Provides good customer service
- Demonstrates respect for the ethnic, cultural, and physical diversity of the staff and community
- Demonstrates ability to work well with other staff
- Behaves in a professional manner both during and after work hours

<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>

SUPERVISORY PERFORMANCE (applicable for staff serving in a supervisory position)

Satisfactory Needs Improvement* Not Observed/Applicable

- Controls materials and supplies appropriately
- Solves problems creatively and initiates needed activities
- Assigns tasks clearly
- Submits accurate and timely reports
- Provides constructive feedback and evaluation to assigned staff
- Exhibits respect for staff assigned
- Is available to staff
- Budgets properly and manages delegated financial authority
- Requests staff appropriately
- Coordinates or administers the service delivery plan
- Execution plan, and/or closing plan

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* Items marked "Needs Improvement" require specific examples of deficiency and improvement recommendations documented in "Performance Narrative" on the reverse side of this form.

PERFORMANCE NARRATIVE: (Attach an additional sheet if necessary)

DAVID HAS DEMONSTRATED GOOD SKILLS IN COMMUNICATIONS, DIPLOMACY AND NEGOTIATION. HE HAS THE ABILITY TO EVALUATE SITUATIONS AND RESPOND ACCORDINGLY. HE IS BOTH INTUITIVE AND PERSONABLE. HE IS A WELCOME ADDITION TO THE LIAISON TEAM.

Disaster training recommended to enhance or improve knowledge and skills:

DMT

Additional experience recommended to enhance or improve knowledge and skills:

Based upon performance on this relief operation, I recommend the following for consideration: (check one)

- ☒ The staff member be promoted to the Coordinator position.
☐ The staff member continue at the same level.
☐ The staff member be placed in a position of lesser responsibility.
☐ The staff member not be assigned to future operations without further training/counseling.

Direct Supervisor's Name: HELEN L. LAKE

Title: GL-C

Direct Supervisor's Signature: Helen L. Lake

Date: 10/26/98

Reviewer's Name:

Title:

Technical Input Provided By—Name:

Title:

Reviewer's Comments:

Reviewer's Signature:

Date:

Staff Member's Signature:

Date:

(Signature does not imply agreement, but indicates review has been conducted)

Staff Member's Comments:

American Red Cross Form 5385 (Rev. 8-48)

David has been on target in anticipative and meeting situations head on. He has demonstrated a high level of skill when dealing with officials unfamiliar with our policies or structure. He also handles sensitive challenges in a calm, objective manner with a great deal of confidence. I personally appreciate the job David has done in the West. Thank you.

Disaster training recommended to enhance or improve knowledge and skills:

Additional experience recommended to enhance or improve knowledge and skills:

David should be considered for an EST #6 assignment.

Based upon performance on this relief operation I recommend the following for consideration: (check one)

- ☒ The staff member be promoted to the _____ position.
☐ The staff member continue at the same level.
☐ The staff member be placed in a position of lesser responsibility.
☐ The staff member not be assigned to future operations without further training/counseling.

Direct Supervisor's Name: Richard R. Rasmussen Title: Adm/DC

Direct Supervisor's Signature: [Signature] Date: 11/11/98

Reviewer's Name: Burt Blumentfeld Title: LG/AD

Technical Input Provided By Name: Burt Blumentfeld Title: LG/AD

Reviewers' Comments:

Reviewer's Signature: Burt Blumentfeld (by fax) Date: 11/11/98

Staff Member's Signature: [Signature] Date: 11/11/98

(Signature does not imply agreement, but indicates review has been conducted)

Staff Member's Comments: Richard was very supportive of the LG function in Mayaguez Pk. His leadership made my job much less difficult. I hope to have other opportunities to work together on future DR's

American Red Cross

DISASTER RELIEF OPERATION WORK PERFORMANCE EVALUATION

Name: David Trach
 Unit of Affiliation: Broward
 City: Fort Lauderdale
 STATE FL CHAPTER CODE 11010214 SOCIAL SECURITY NUMBER 21611-016-515746
 UNIT CODE 1111
 Personnel Classification (check one)
☒ Volunteer ☐ Chapter Employee
☐ National Employee ☐ National Disaster Reserve
☐ Other (specify) _____

Name of Disaster: Hurr. Georges P.R. DR No. 255
 DSHR System Member: ☒ Yes ☐ No
 Function/Position: GILS
 Assignment: G.L. - Mayaguez P.R.
 DSHR System Specialty Track: Government Liaison
 Length of Time Above Position Was Held:
 From: 10/21/92 to 12/3/98 Days: 46
 Length of Time Supervised by This Evaluator: Days: 46
 Place(s) of Assignment: Mayaguez HQ

OVERALL PERFORMANCE ON THIS RELIEF OPERATION

☒ Satisfactory

☐ Needs Improvement

PERFORMANCE CRITERIA

WORK REQUIREMENTS:

- Supports the objectives of the supervisor, relief operation, and the organization
- Applies function regulations, procedures, and processes correctly
- Exercises authority appropriate to assigned position
- Carries out assigned tasks independently
- Exhibits flexibility and works well under stress and adverse conditions
- Exhibits good work habits, punctuality, and attendance

Satisfactory Needs Improvement *

<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>

INTERPERSONAL SKILLS:

- Provides good customer service
- Demonstrates respect for the ethnic, cultural, and physical diversity of the staff and community
- Demonstrates ability to work well with other staff
- Behaves in a professional manner both during and after work hours

<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>

SUPERVISORY PERFORMANCE (applicable for staff serving in a supervisory position)

Satisfactory Needs Improvement* Not Observed/Applicable

- | | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| • Controls materials and supplies appropriately | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Solves problems creatively and initiates needed activities | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Assigns tasks clearly | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Submits accurate and timely reports | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Provides constructive feedback and evaluation to assigned staff | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Exhibits respect for staff assigned | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Is available to staff | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Budgets properly and manages delegated financial authority | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Requests staff appropriately | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Establishes or administers the service delivery plan, transition plan, and/or closing plan | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

* Items marked "Needs Improvement" require specific examples of deficiency and improvement recommendations documented in the "performance narrative" on the reverse side of this form.

was consistently outstanding. The Regional Director highly praised his efforts in support of the Senior Delivery Plan. He demonstrated a high level of problem solving skills and could be counted on to initiate action and for careful follow up in the resolution of a myriad of critical issues. He successfully established an excellent working relationship with the 66 municipalities in his region and did the final closing with 19 municipalities in the South. He mentioned a supervisor and I believe he is a energetic pro active, knowledgeable & skills and should be promoted to that level. Immediate Disaster training recommended to enhance or improve knowledge and skills:

Additional experience recommended to enhance or improve knowledge and skills:

Further assignments at Coordinator level

Based upon performance on this relief operation I recommend the following for consideration: (check one)

- ☒ The staff member be promoted to the Coordinator position.
- ☐ The staff member continue at the same level.
- ☐ The staff member be placed in a position of lesser responsibility.
- ☐ The staff member not be assigned to future operations without further training/counseling.



Direct Supervisor's Name: Berta Blumenfeld

Title: GL/AD

Direct Supervisor's Signature: Berta Blumenfeld

Date: 12/4/98

Reviewer's Name: Charilyn Fox

Title: GLD

Technical Input Provided By-Name: _____

Title: _____

Reviewers' Comments: David demonstrated skills in communication and interpersonal situations which led to his success in this function and on this operation. Thanks, David

Reviewer's Signature: Charilyn Fox

Date: 12/4/98

Staff Member's Signature: NUT

Date: 12/3/98

(Signature does not imply agreement, but indicates review has been conducted)

Staff Member's Comments: _____

American Red Cross

DISASTER RELIEF OPERATION

WORK PERFORMANCE EVALUATION

Name: David Tracy
 Unit of Affiliation: Broward
 City: Ft. Lauderdale
 State: FL Chapter Code: 10024
 Social Security Number: 261767546
 Unit Code:
 Personal Classification (check one)
☒ Volunteer ☐ Chapter Employee
☐ National Employee ☐ National Disaster Reserve
☐ Other (specify)

Name of Disaster: Alaska Air Lines 01/00 /Cr DR No. 285
 DSHR System Member ☒ Yes ☐ No
 Function/Position GL / AO
 Assignment: GL / O
 DSHR System Specialty Track: GL
 Length of Time Above Position Was Held:
 From: 2-1-00 To: 2-8-00 Days: 8
 Length of Time Supervised by This Evaluator: Days: 8
 Place(s) of Assignment: HQ / DOC (Recovery Site)

OVERALL PERFORMANCE ON THIS RELIEF OPERATION

☒ Satisfactory

☐ Needs Improvement

Performance Criteria

	Satisfactory	Needs improvement*
WORK REQUIREMENTS:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
- Supports the objectives of the supervisor, relief operation, and the organization	<input checked="" type="checkbox"/>	<input type="checkbox"/>
- Applies function regulations, procedures, and processes correctly	<input checked="" type="checkbox"/>	<input type="checkbox"/>
- Exercises authority appropriate to assigned position	<input checked="" type="checkbox"/>	<input type="checkbox"/>
- Carries out assigned tasks independently	<input checked="" type="checkbox"/>	<input type="checkbox"/>
- Exhibits flexibility and works well under stress and adverse conditions	<input checked="" type="checkbox"/>	<input type="checkbox"/>
- Exhibits good work habits, punctuality and attendance	<input checked="" type="checkbox"/>	<input type="checkbox"/>
INTERPERSONAL SKILLS:		
- Provides good customer service	<input checked="" type="checkbox"/>	<input type="checkbox"/>
- Demonstrates respect for the ethnic, cultural, and physical diversity of the staff and community	<input checked="" type="checkbox"/>	<input type="checkbox"/>
- Demonstrates ability to work well with other staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>
- Behaves in a professional manner both during and after work hours	<input checked="" type="checkbox"/>	<input type="checkbox"/>

SUPERVISORY PERFORMANCE (applicable for staff serving in a supervisory position)

	Satisfactory	Needs Improvement*	Not Observed/Applicable
- Controls materials and supplies appropriately	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
- Solves problems creatively and initiates needed activities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Assigns tasks clearly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Submits accurate and timely reports	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Provides constructive feedback and evaluation to assigned staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Exhibits respect for staff assigned	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Is available to staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Budgets properly and manages delegated financial authority	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
- Requests staff appropriately	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Establishes or administers the service delivery plan, transition plan, and/or closing plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* Items marked "Needs Improvement" require specific examples of deficiency and improvement recommendations documented in the "performance narrative" on the reverse side of this form.

Performance Narrative: (Attach an additional sheet if necessary)

Dave met the task at hand with professionalism and knowledge providing the needed information to the job HQ. He was always very professional and courteous to all other staff and was always willing to provide requested information. He promptly informed job headquarters of all unusual, but important information, and routinely communicated status reports. Dave was an excellent representative of the Red Cross, making all the correct contacts at the scene, which resulted in HQ being kept informed of all important events. He had excellent rapport with county, state and federal agencies on the scene which created an atmosphere of trust between the Red Cross and those agencies. He most readily volunteered to assist with other duties as during the Memorial Field for the families at Pepperdine University. He is very aware and acts accordingly, of the sensitivity of this type of response and was always appropriate. He was one individual which could be a model to others through the professionalism he brought to the job. It was a pleasure to work with Dave and he was appreciated for being on the job.

Disaster training recommended enhancing or improving knowledge and skills:

Anything AIR Team related.

Additional experience recommended enhancing or improving knowledge and skills:

Another AIR Team response.

Based upon performance on this relief operation I recommend the following for consideration: (check one)

- ☐ The staff member be promoted to the _____ position.
☒ The staff member continues at the same level.
☐ The staff member be placed in a position of lesser responsibility
☐ The staff member not be assigned to future operations without further training/counseling

Deputy Supervisor's Name Mike Wemmer

Title: 2-7-00

Deputy Supervisor's Signature Mike Wemmer

Date: 2/7/00

Reviewer's Name: Ann D. Miller

Title: Manager, Operations

Technical Input Provided By-Name: Celi Rostovsky

Title: Assoc., Govern & Assoc.

Reviewer's Comments: Concurrence via telephone 2-7-00

Reviewer's Signature _____

Date _____

Member's Signature _____

Date: 2/7/00

(Signature does not imply agreement, but indicated review has been conducted)

Member's Comments: This was a very well run operation
Mike Wemmer was able & efficient to meet the demands
of this type of situation. Look forward to having the
opportunity to work on future assignments with him.